



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
REGION III

841 Chestnut Building  
Philadelphia, Pennsylvania 19107

100146  
ORIGINAL  
(Rec)

JUN 11 1993

**CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

Standard Chlorine of Delaware, Inc.  
Box 319  
Governor Lea Road  
Delaware City, DE 19706

Attn: Louis P. Wiener, President

RE: Standard Chlorine of Delaware Site  
Delaware City, Delaware

Dear Mr. Wiener:

The U.S. Environmental Protection Agency (EPA) is seeking information concerning a release, or the threat of release, of hazardous substances, pollutants or contaminants into the environment at the Standard Chlorine of Delaware Site, Governor Lea Road, Delaware City, Delaware (the "Site"). Pursuant to the authority of Section 104(e) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980, as amended ("CERCLA"), 42 U.S.C. Section 9604(e), your company is required to furnish all information and documents in its possession, custody or control, or in the possession, custody or control of any of its employees or agents which concern, refer, or relate to hazardous substances as defined by Section 101(14) of CERCLA, 42 U.S.C. Section 9601(14), pollutants and/or contaminants as defined by Section 101(33), 42 U.S.C. Section 9601(33), which were transported to, stored, treated, or disposed of at the above referenced Site.

Section 104 of CERCLA, 42 U.S.C. Section 9604, authorizes EPA to pursue penalties for failure to comply with that section or for failure to respond adequately to required submissions of information. In addition, providing false, fictitious, or fraudulent statements or representations may subject you to criminal penalties under 18 U.S.C. Section 1001. The information you provide may be used by EPA in administrative, civil, or criminal proceedings.

As used herein, the term "documents" means: writings (handwritten, typed or otherwise produced or reproduced) and includes, but is not limited to, any invoices, checks, receipts, bills of lading, weight receipts, toll receipts, correspondence, offers, contracts, agreements, deeds, leases, manifests, licenses, permits, bids, proposals, policies of insurance, logs,

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books of original entry, minutes of meetings, memoranda, notes, calendar or daily entries, agendas, bulletins, notices, announcements, charts, maps, photographs, drawings, manuals, brochures, reports of scientific study or investigation, schedules, price lists, telegrams, teletypes, phono-records, magnetic voice or video records, tapes, summaries, magnetic tapes, punch cards, recordings, discs, computer printouts, or other data compilations from which information can be obtained or translated.

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#### INSTRUCTIONS

- 1) Provide a separate narrative response to each and every question and subpart of a question set forth in this Information Request;
- 2) Precede each answer with the number of the question and letter of the subpart of the question to which it responds; and
- 3) For each question, provide the names, titles, areas of responsibility, addresses, and telephone numbers of all persons consulted in preparation of the answers to this Information Request.

#### QUESTIONS

1. Please complete the enclosed document titled "Financial Statement of Corporate Debtor." In completing this document please indicate clearly for all assets and debts identified on the questionnaire, the type of ownership of each asset described (i.e., owned individually, owned jointly with affiliate/subsidiary/parent or owned with other parties).
2. In addition to completion of the enclosed financial statement, it is requested that you provide a copy of your U.S. Corporate Income Tax Return, Form 1120 for the last five years. You are to provide a facsimile of the tax return submitted to the Internal Revenue Service that contains any and all attachments that would be required by the Internal Revenue Service at the time of filing. Furthermore, if any of the income, loss or gain reported on the return related from partnership, trust or subchapter S sources please provide a copy of the 1065, 1041 or 1120S return as well as any and all attachments that would be required by the Internal Revenue Service at the time of filing. Furthermore, if any of the returns provided have been audited, corrected, amended or changed; or if you have been notified of an audit, please describe the circumstances pertaining to that event.
3. Additionally, you are asked to provide a copy of any and all financial statements that apply to the last five years. This is to include all internal and external audits, balance

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sheets, income statements and other statements that purport to describe your worth and/or income and expenses. In addition, if at any point in the last five years, you were required to submit financial statements please provide a copy of what was submitted as well as an explanation which describes the reason for submission (i.e., for loan or for demonstration of the financial capability to deliver on a contract).

4. Copies of all rental agreements, easements, exclusive rights to use, options to buy, or other documents that describe interests in Real Estate possessed by you or possessed by other entities for your benefit, currently in existence or which were in effect for the past five years. If there are any oral agreements pertaining to these agreements or other unwritten agreements exist, please provide the specifics as to the length of the agreement, the specific requirements of the agreement and the compensation payable regarding the agreement.
5. Identify all related party transactions, as set forth below, that apply to this corporate entity. Your identification is to include the dollar value of the transaction as reported in the financial statements and fair market value of each transaction. Related party transactions include any activity between this corporation and any and all of the following:

Affiliated corporations, affiliated partnerships or other business entity that although it is not owned by this corporation may have the same owner/investor as does this corporation.

The parent corporate entity, all subsidiary entities of the parent corporation and all subsidiaries of this corporation.

The stockholders of this corporation.

You are entitled to assert a claim of business confidentiality covering any part or all of the submitted information, in the manner described in 40 C.F.R. Section 2.203(b). Information subject to a claim of business confidentiality will be made available to the public only in accordance with the procedures set forth in 40 C.F.R. Part 2, Subpart B. If a claim of business confidentiality is not asserted when the information is submitted to EPA, EPA may make this information available to the public without further notice to you.

EPA may contract with one or more of the following independent contracting firms to review the documentation, including documents which you claim are confidential business information ("CBI") which you submit in response to this

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information request, depending on available agency resources. The contractor will be filing, organizing, analyzing and/or summarizing the information for agency personnel. EPA's contractors are: CDM-Federal Programs Corporation, Dynamac Corporation, CH2MHill, Black & Veatch Waste Science and Technology Corporation, TetraTech, Inc., Ecology & Environment, Inc., Halliburton NUS Corporation (formerly known as Halliburton NUS Environmental Corporation), Environmental Technology, Inc., and Roy F. Weston, Inc. operating under contract numbers 68-W9-0004, 68-W9-0005, 68-W8-0090, 68-W8-0091, 68-W8-0092, 68-W8-0085, 68-W8-0037, 68-S2-3002, and 68-W0-0036, respectively. These contractors have signed a contract with EPA that contains a confidentiality clause with respect to CBI that they handle for EPA. Section 104 of the Superfund law, and EPA's regulations at 40 C.F.R. § 2.310 provide that EPA may share such CBI with contractors. If you have any objection to disclosure by EPA of documents which you claim are CBI to any or all of these entities, you must notify EPA at the time you submit such documents.

You must respond in writing to this required submission of information within **fifteen (15) calendar days** of your receipt of this letter. For a corporation, the response must be signed by an appropriately authorized corporate official. For other entities, the response must be signed by an authorized official of that entity. If, for any reason, you do not provide all information responsive to this letter, in your answer to EPA you must: (1) describe specifically what was not provided, (2) supply to EPA a clear identification of the document(s) not provided, and (3) provide to EPA an appropriate reason why the document(s) was not provided.

All documents and information should be sent to:

Joan Armstrong (3HW11)  
U.S. Environmental Protection Agency  
841 Chestnut Building  
Philadelphia, PA 19107

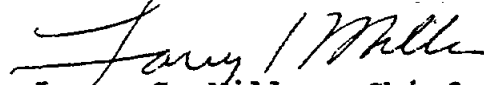
If you have any question concerning this matter, please contact Joan Armstrong at (215) 597-0531. Specific legal questions should be referred to Sarah P. Keating, Esquire at (215) 597-0814.

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This required submission of information is not subject to the approval requirements of the Paperwork Reduction Act of 1980, 44 U.S.C. Section 3501, et seq.

Sincerely,



Larry S. Miller, Chief  
PRP Search Section

Enclosure

cc: Joan Armstrong (3HW11)  
Sarah P. Keating, Esquire (3RC33)  
Kate Lose (3HW42)

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ENCLOSURE I

FINANCIAL STATEMENT OF CORPORATE DEBTOR

Submitted For Government  
Action On Claims Due  
To The United States

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(Use Additional Sheets Where Needed)

1. Name (Debtor) \_\_\_\_\_ 1-For Profit ( )  
Type 2-Not for Profit ( )

2. Business Address

\_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip

Note: Attach schedule of all business addresses

3. Foreign \_\_\_\_\_  
Domestic \_\_\_\_\_

4. Legal form of business organization during last five (5) years.

\_\_\_\_\_ Corporation

\_\_\_\_\_ Subchapter S Corporation

\_\_\_\_\_ Partnership

\_\_\_\_\_ Proprietorship

\_\_\_\_\_ Trust

\_\_\_\_\_ Other? \_\_\_\_\_

5. State of Incorporation \_\_\_\_\_ Date of Incorporation \_\_\_\_\_

6. Name of Registered Agent \_\_\_\_\_

7. Address of Registered Agent \_\_\_\_\_

Phone \_\_\_\_\_

8. Names and addresses of principal stockholders. Number of  
shares owned by each. (If more than 8 shareholders, list only  
those with 5 percent or more stock ownership.) Total  
outstanding shares \_\_\_\_\_

	Name	Address	Shares
(1)	_____	_____	_____
(2)	_____	_____	_____
	_____	_____	_____

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(3)	_____	_____	_____
(4)	_____	_____	_____
(5)	_____	_____	_____
(6)	_____	_____	_____
(7)	_____	_____	_____
(8)	_____	_____	_____

9. (A) Names and addresses of current (and for previous five years) officers and number of shares held by each.

	Name	Address	Shares	Term
(1)	_____	_____	_____	_____
(2)	_____	_____	_____	_____
(3)	_____	_____	_____	_____
(4)	_____	_____	_____	_____
(5)	_____	_____	_____	_____
(6)	_____	_____	_____	_____
(7)	_____	_____	_____	_____
(8)	_____	_____	_____	_____
(9)	_____	_____	_____	_____
(10)	_____	_____	_____	_____

(B) Names and addresses of current (and for previous five years) members of board of directors and number of shares held by each.

	Name	Address	Shares	Term
(1)	_____	_____	_____	_____
(2)	_____	_____	_____	_____
(3)	_____	_____	_____	_____
(4)	_____	_____	_____	_____



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(5) \_\_\_\_\_  
(6) \_\_\_\_\_  
(7) \_\_\_\_\_  
(8) \_\_\_\_\_  
(9) \_\_\_\_\_  
(10) \_\_\_\_\_

10. Has this organization ever issued a prospectus for the sale of stock? Yes ( ) No ( ). List date, number, and type of shares for each prospectus during the last five years.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. (A) Registration on national or local stock exchange(s). (Give details, including date of registration and/or delisting).

(1) \_\_\_\_\_  
(2) \_\_\_\_\_  
(3) \_\_\_\_\_

(B) Total authorized shares for each type issued and present market value per share on each type of stock (or book value if not actively traded).

	Type of Shares	Total Shares	Book Value	Market Value
(1)	_____	_____	_____	_____
(2)	_____	_____	_____	_____
(3)	_____	_____	_____	_____
(4)	_____	_____	_____	_____

(C) Total outstanding shares of each type of stock currently being held as Treasury Stock.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(D) Total outstanding shares of each type of stock.

\_\_\_\_\_  
\_\_\_\_\_

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(E) Amount of bonded debt and principal bondholders.

12. List states and municipalities to which taxes have been paid and/or are being paid. Describe nature and amount of such taxes, state most recent year of payment thereof and whether tax payments are current.

13. Has this organization filed United States income tax returns during the last 5 years? Yes ( ) No ( )  
To what I.R.S. Office(s) \_\_\_\_\_

What years? \_\_\_\_\_

Are Federal taxes current? Yes ( ) No ( )

Provide income tax returns for the following years: 1987, 1988, 1989, 1990, and 1991.

14. Names and addresses of  
(A) Organization's independent certified public accountants

(B) Organization attorney(s) retained by organization from 1979 to 1992.

15. Has this organization filed financial forms with any organization or government entity? List name of organization or entity, date, and type of financial form.

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16. Does this organization have a Profit and Loss Statement and Balance Sheet for the most recent calendar or fiscal year and for specified past years? Past Years: 1988, 1989, 1990, 1991, and 1992. Submit one copy of each. (Audited documents are preferred. If Balance Sheets and Income Statements are submitted, answer only questions 2(A), 2(B), and 3(A) below).

(1) Assets

		<u>Amount</u>				
	<u>Year</u>					
Cash	\$					
Securities	\$					
Existing						
Facilities	\$					
Equipment	\$					
Original						
Cost	\$					
Depreciation	\$					
Inventory	\$					
Accounts						
Receivable	\$					
Other	\$					
TOTAL ASSETS	\$					

(2) Liabilities

		<u>Year</u>				
Loans Payable <sup>1</sup>						
Principal	\$					
Monthly						
Payment	\$					
Mortgages <sup>2</sup>						
Principal	\$					
Monthly						
Payment	\$					
Accounts						
Payable	\$					
Deferred Taxes	\$					
Insurance						
Premiums	\$					
Other	\$					

Stockholder's Equity

Common Stock	\$					
Paid-in-						
Capital	\$					

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Retained Earnings	\$	_____	_____	_____	_____	_____
Total Liabilities and Stockholder's Equity	\$	_____	_____	_____	_____	_____

<sup>1</sup> Complete loan information as requested on page 6, under a) Loans Payable.

<sup>2</sup> Complete mortgage information as requested on page 6, under b) Mortgages Payable.

**A. LOANS PAYABLE**

	Owed to/Purpose	Term/Interest Rate	Collateral/Cosigner
1)	_____	_____	_____
2)	_____	_____	_____
3)	_____	_____	_____
	Monthly Payments	Original Amount/Date	Present Balance
1)	_____	_____	_____
2)	_____	_____	_____
3)	_____	_____	_____

**B. MORTGAGES PAYABLE**

	Address	Term/Interest Rate	Collateral/Cosigner
1)	_____	_____	_____
2)	_____	_____	_____
3)	_____	_____	_____
	Monthly Payments	Original Amount/Date	Present Balance
1)	_____	_____	_____
2)	_____	_____	_____
3)	_____	_____	_____

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(3) Income/Expenses

Gross Income

Net

Sales	\$	_____	_____	_____	_____	_____
Interest		_____	_____	_____	_____	_____
Income	\$	_____	_____	_____	_____	_____
Dividends	\$	_____	_____	_____	_____	_____
Other	\$	_____	_____	_____	_____	_____

Operating Expenses

Wages	\$	_____	_____	_____	_____	_____
Overhead	\$	_____	_____	_____	_____	_____
Lease		_____	_____	_____	_____	_____
Paymts.	\$	_____	_____	_____	_____	_____
Interest		_____	_____	_____	_____	_____
Expense	\$	_____	_____	_____	_____	_____
Cost of		_____	_____	_____	_____	_____
Sales	\$	_____	_____	_____	_____	_____
Net		_____	_____	_____	_____	_____
Income	\$	_____	_____	_____	_____	_____

(A) In addition, provide the following firm size information:

- (1) Number of Employees \_\_\_\_\_
- (2) Size of Warehouse \_\_\_\_\_
- (3) Number and Size of Shipments \_\_\_\_\_
- (4) Other \_\_\_\_\_

(Attach this information for the following additional years for question 16 on separate sheets: 1988, 1989, 1990, 1991 and 1992.)

17. Does this organization maintain bank accounts? Provide names and addresses of banks, savings and loan associations, and other such entities, within the United States or located elsewhere. Indicate name and number of accounts and balances.

	Name of Bank	Account Number	Balance (Approx.)
(A)	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

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	Name of Bank	Account Number	Balance (Approx.)
(B)	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(C)	Other Account(s)		
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(D)	Savings & Loan Associations or other such entities		
	_____	_____	_____
(E)	Trust Account(s)		
	_____	_____	_____
	_____	_____	_____
(F)	Other Account(s)		
	_____	_____	_____

18. List all commercial paper, negotiable or non-negotiable, in which the organization has any interest whatsoever, presently in transit or in the possession of any banking institution. Describe such paper and the organization's interest therein, and state its present location. List all accounts and loans receivable in excess of \$300 and specify if due from an officer, stockholder, or director.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

19. Has this organization engaged in any Joint Loan Agreements, including Letters of Credit, with any other organization(s)? Describe all such agreements.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

20. Does this organization have any debt co-insured by another organization? Describe all such agreements.
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
21. List all equity participation in other organizations both domestic and foreign in which this organization has an interest, including the type, amount, and terms of such interest.
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
22. List all debt participation in other organizations both domestic and foreign in which this organization has an interest, including the type, amount, and terms of such interest.
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
23. Is this organization presently:
- (A) Active  
(Answer "No" for inactive, but still in existence) Yes ( ) No ( )
- (B) Void and/or terminated by state authority Yes ( ) No ( )
- (C) Otherwise dissolved Yes ( ) No ( )
- 1) date \_\_\_\_\_
- 2) by whom \_\_\_\_\_
- 3) reason \_\_\_\_\_
24. (A) List corporate salaries to and/or drawings of the following personnel for the last five taxable years:
- | Position (Including Officers) | Specify Year |       |       |       |       |       |
|-------------------------------|--------------|-------|-------|-------|-------|-------|
|                               | ( )          | ( )   | ( )   | ( )   | ( )   | ( )   |
| President _____               | _____        | _____ | _____ | _____ | _____ | _____ |
| Chairman/Board _____          | _____        | _____ | _____ | _____ | _____ | _____ |

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Secretary \_\_\_\_\_

Treasurer \_\_\_\_\_

(B) List the five most highly compensated employees or officers other than those above, describe their positions, and set forth annual salaries and/or bonuses for the last five taxable years:

Name	Position	Specify Year				
		( )	( )	( )	( )	( )
1. _____	_____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____	_____	_____

(C) Describe the nature of the compensation paid to the persons listed in (A) and (B) above and set forth any stock options, persons, profit sharing, royalties, or other deferred compensation rights of said persons.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

25. List organization's commercial activity (fields of activity resulting in income) and SIC Code.

	Commercial Activity	SIC Code
Primary	_____	_____
Other 1	_____	_____
2	_____	_____
3	_____	_____

26. List all other supplementary fields of activity in which this organization is engaged, either directly, through subsidiaries, or affiliates, stating the name(s) and state(s) of incorporation of such subsidiaries or affiliates.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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27. Has this organization at any time been the subject of any proceeding under the provisions of any State Insolvency Law, or the Federal Bankruptcy Act, as amended? If so, supply the following information as to each such proceeding:

(A) Date (Commencement) \_\_\_\_\_

(B) Date (Termination) \_\_\_\_\_

(C) Discharge or other disposition, if any, and operative effect thereof: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(D) State Court \_\_\_\_\_ Federal Court \_\_\_\_\_  
County District

(E) Docket No. \_\_\_\_\_

28. (A) List all Real Estate and Personal Property of an estimated value in excess of \$500.00 owned or under contract to be purchased by this organization and where located:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(B) List and describe all judgments, recorded and unrecorded:

1) Against the organization

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2) In favor of the organization

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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(C) List and describe all other encumbrances against Real Estate owned by the organization (including but not limited to mortgages, recorded or unrecorded):

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(D) List and describe all other encumbrances (including but not limited to Security Interest, whether preferred or not) against any such personal property owned by the organization as is listed in 28(A) above:

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(E) List and describe location of Real Estate, including Real Estate being purchased under contract, with name and address of Seller and contract price:

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29. List all Life Insurance, now in force on any or all Officers, Directors, and/or "key" employees, setting forth face amounts, names of life insurance companies, and policy numbers where this organization has an "insurable interest" and/or is paying the premium or part of same. Where applicable, indicate under which policy(ies) this organization is a Beneficiary, type of policy(ies), yearly premium, and location of policy(ies). In addition, describe the conditions of and borrowing options available under each policy.

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30. For the following types of policies, list all primary and excess insurance policies, the deductible amount, the per occurrence, and aggregate coverage limit for each policy. List all policies held by the firm (or predecessor firms) starting from the date which the pollution incidents began.

A. Comprehensive General Liability

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B. Environmental Impairment Liability

C. Other policies for which coverage might apply,  
including participation in risk retention pools

Other

31. List all transfers of any or all assets, real and/or personal and each (over \$300.00) made by this organization, OTHER THAN IN THE ORDINARY COURSE OF BUSINESS, during the last three (3) calendar years and state to whom the transfer was made. Describe compensation paid by recipient and to whom.

Date	Amount	Property Transferred	To Whom	Conditions of Transfer

32. Is this organization a party in any law suit now pending?  
Yes ( ) (Give details below) No ( )

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33. Please list names and addresses of any persons or other business entity, holding funds in escrow or in trust for this organization, or any of its subsidiaries or affiliates.

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34. Other Information Requested: \_\_\_\_\_

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35. Additional Remarks: \_\_\_\_\_

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#### Verification and Affidavit

With knowledge of the penalties for false statements provided by 18 U.S. C. 1001 (\$10,000 fine and/or five years imprisonment) and with knowledge that this financial statement is submitted by me as a responsible officer of this organization to affect action by the Department of Justice, I hereby certify that I believe and I completely understand the above statement, and that the same is a true and complete statement of all organization income and assets, real and personal, whether held in the company name or otherwise.

Date \_\_\_\_\_

\_\_\_\_\_  
Affiant (Officer)

\_\_\_\_\_  
(List Corporate Position)

\_\_\_\_\_  
Age (Next Birthday)

\_\_\_\_\_  
NOTARY PUBLIC

UNITED STATES POSTAL SERVICE

Official Business



PENALTY FOR PRIVATE  
USE, \$300

Print your name, address and ZIP Code here

JOAN ARMSTRONG  
EPA REGION III  
PRP SEARCH SECTION (3HW11)  
841 CHESTNUT BUILDING  
PHILADELPHIA, PA 19107

AR200407

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**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt Fee will provide you the signature of the person delivered to and the date of delivery.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

*Standard Chlorine of Delaware Inc.  
Box 319  
Governors Run Road  
Delaware City, DE 19706*

4a. Article Number

*P256697260*

4b. Service Type

- |   |   |
|---|---|
| <input type="checkbox"/> Registered           | <input type="checkbox"/> Insured                        |
| <input checked="" type="checkbox"/> Certified | <input type="checkbox"/> COD                            |
| <input type="checkbox"/> Express Mail         | <input type="checkbox"/> Return Receipt for Merchandise |

7. Date of Delivery

*6-14-93*

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

*K. K. [Signature]*

PS Form 3811, November 1990 \* U.S. GPO: 1991-257-088

**DOMESTIC RETURN RECEIPT**